



Key information and rates
January 2024

Insured by



Supported by



Why should you take out a private health insurance policy?

If life throws you an unexpected challenge, little things can mean a lot. When it comes to your health, at Universal Life we believe that swift diagnosis and prompt treatment matters most to our members, along with genuine help, support and understanding from people who care.

Whether you're in Cyprus or travelling abroad, you'll want to feel sure that if anything should happen to you or your family in the way of illness or injury, you'll have access to the best possible medical care. Our MultiCare International Health Plan is designed to offer a range of plan options to suit your needs – you not only have prompt access to treatment in Cyprus, you also have the choice of receiving your treatment overseas at a facility of your choice.

With access to private health cover, you can:

- choose where to receive treatment
- choose who provides the treatment
- have direct settlement facilities for in-patient hospital bills
- benefit from being treated in private facilities with a private room
- avoid waiting lists.

Why you should choose Universal Life to be your provider of choice?

Universal Life is one of the most prominent life insurance companies on the island and the leading company in the local accident and health sector.* The Company's products are distributed through a network of professional and highly trained full time insurance agents.



*As at June 2023



The MultiCare International Health Plan

We understand that people have different needs when looking for health cover which is why our three options of international health plans available are specially designed to support those who reside in Cyprus for 180 days or more in a year.

They also allow you to decide where and when you want to be treated within your area of cover, and gives you the tools to help look after your health, every day.

For students we also offer a plan to cover them either in or outside of Cyprus during their studies.

What you're covered For – MultiCare International Health Plan				
Benefits	Premiere	Value Plus	SmartStart (not available for groups)	Student Care (not available for groups)
Areas of cover	Area 1 or Area 2	Area 1 or Area 2	Area 1 or Area 2	Area 1 or Area 2
Yearly maximum	€3,000,000	€500,000	€100,000	€100,000

Choose your area of cover

Multicare offers various levels of cover of private health insurance. You can choose from our two area options depending on the cover you require.

These choices are:

Area 1 - Provides worldwide cover, or

Area 2 - Provides cover throughout the world, excluding the USA, Canada and Switzerland.

Whichever area of cover is selected, you can receive medical treatment not only in Cyprus but also in any other country within the chosen area of cover.

Your plan options in detail

MultiCare International Health Plan				
The four plans you can choose from	Premiere	Value Plus	Smart Start (not available for groups)	StudentCare (not available for groups)
Areas of cover	Area 1 or Area 2	Area 1 or Area 2	Area 1 or Area 2	Area 1 or Area 2
Level of cover	Standard: Benefits 1-19, 27 & 32 Comprehensive: Benefits 1-32	Standard: Benefits 1-19, 27 & 32 Comprehensive: Benefits 1-32 (excluding 29 & 30)	Comprehensive: Benefits 1-22, 27 & 32 (excluding 5, 8, 11, 12, 13, 15, 16, 18, 19, 23 - 26, 28 - 31)	Standard: Benefits 1-17 (excluding 5, 11, 12, 13, 15, 16, 18 & 19) Comprehensive: Benefits 1-32 (excluding 5, 11, 12, 13, 15, 16, 18, 19, 24 - 26, 28 - 31)
Yearly maximum	€3,000,000	€500,000	€100,000	€100,000
Annual excess payable	No excess or optional: €1,000 / €2,500 / €5,000	€85 each year or optional*: €1,000 / €2,500 / €5,000 *Optional excess: €1,000 (total mandatory + optional = €1,085) / €2,500 (total mandatory + optional = €2,585) / €5,000 (total mandatory + optional = €5,085)	No excess	Option 1: No excess Option 2: €85 each year Option 3: €170 each year
In-patient and daycare treatment				
1 Hospital charges	Paid in full up to the limit shown in your plan. (see also benefit 16)	Paid in full up to the limit shown in your plan. (see also benefit 16)	Paid in full up to the limit shown on your plan.	Paid in full up to the limit shown in your plan when you have treatment in your principal country of residence or within your area of cover.
2 Surgeons' and Anaesthetists' charges			This benefit includes treatment for Oncology, heart conditions, stroke, treatment as a result of external trauma (provided that appropriate treatment begins within 48 hours of the initial trauma). The above treatment may be delivered on an in-patient or day care basis.	
3 Physicians' charges				
4 Consultations diagnostic procedures and physiotherapy				
5 Additional accommodation			No benefit	No benefit
6 Cash benefit	€200 per night. Up to 30 nights per policy year.	€180 per night. Up to 30 nights per policy year.	€80 per night. Up to 30 nights per policy year	€150 per night. Up to 30 nights per policy year.
7 In-patient Rehabilitation (medically necessary)	We will pay up to 28 days per event.	We will pay up to 28 days per event.	We will pay up to 28 days per event.	We will pay up to 28 days per event.

Your plan options in detail

MultiCare International Health Plan – continued				
The four plans you can choose from	Premiere	Value Plus	Smart Start (not available for groups)	StudentCare (not available for groups)
Other treatment				
8 Out-patient surgical procedures	Paid in full up to the limit shown in your plan.	Paid in full up to the limit shown in your plan.	No benefit	Paid in full up to the limit shown in your plan.
9 In-patient CT, MRI and PET scanning			Paid in full up to the limit shown in your plan.	
10 Oncology Treatment Radiotherapy / Chemotherapy				
11 Day patient and outpatient radiotherapy and chemotherapy cash benefit*	€50 per session up to €1,000 a year	€50 per session up to €1,000 a year	No benefit	No benefit
12 Pregnancy	Up to €4,000 for each female member per pregnancy	Up to €3,000 for each female member per pregnancy	No benefit	No benefit
13 Childbirth cash benefit	Premiere Comprehensive €1,300 for each female member per pregnancy. Premiere Standard €1,000 for each female member per pregnancy.	Value Plus Comprehensive €1,000 for each female member per pregnancy. Value Plus Standard €600 for each female member per pregnancy.	No benefit	No benefit
14 Ambulance Transport (when medically essential)	Up to €600 for each member each year	Up to €500 for each member each year	Up to €200 for each member each year	Up to €500 for each member each year
15 Emergency Treatment- Outpatient first aid following an accident	Paid in full up to the limit shown in your plan	Paid in full up to the limit shown in your plan	No benefit	No benefit
16 Outside area of cover (This benefit is payable when members are travelling for business or pleasure only)	Not required for Area 1 cover. For Area 2 benefit for the USA, Canada and Switzerland is payable in respect of six weeks travel each year and is limited to a maximum of €75,000 each year	Not required for Area 1 cover. For Area 2 benefit for the USA, Canada and Switzerland is payable in respect of six weeks travel each year and is limited to a maximum of €60,000 each year	No benefit	No benefit
17 International Emergency Medical Assistance	Paid in full up to the limit shown in your plan.	Paid in full up to the limit shown in your plan.	Paid in full up to the limit shown in your plan.	Paid in full up to the limit shown in your plan.
18 Women's health & wellbeing cover	€150 for each female member each year	€150 for each female member each year	No benefit	No benefit
19 Men's health & wellbeing cover	€20 for each male member each year	€20 for each male member each year	No benefit	No benefit

Your plan options in detail

MultiCare International Health Plan – continued					
The four plans you can choose from	Premiere	Value Plus	Smart Start (not available for groups)	StudentCare (not available for groups)	
Out-patient treatment					
20 Medical practitioner charges and prescription drugs	<p>The overall limit for benefits 20-26 is €5,000 each year.</p> <p>Additionally, benefit 23 is limited to €500 and this counts against the overall limit.</p> <p><i>Please note that all physiotherapy must follow referral by a medical practitioner. Additionally physiotherapy is limited to a maximum of 6 sessions. We will consider a further 6 sessions with the submission of an updated doctor's prescription. If further physiotherapy is needed we will need an updated medical report from the attending medical practitioner.</i></p>	<p>The overall limit for benefits 20-26 is €1,000 each year.</p> <p>Additionally, benefit 23 is limited to €500 and this counts against the overall limit.</p> <p><i>Please note that all physiotherapy must follow referral by a medical practitioner. Additionally physiotherapy is limited to a maximum of 6 sessions. We will consider a further 6 sessions with the submission of an updated doctor's prescription. If further physiotherapy is needed we will need an updated medical report from the attending medical practitioner.</i></p>	<p>The following only applies to benefits 20-22.</p> <p>The overall limit for your out-patient pack is €500 each year. Within this you may claim, up to a maximum value of €100 each year, without a medical practitioner's referral for Health Screening including but not limited to cervical smears, testicular screening, blood tests, screening for sexually transmitted diseases including HIV/AIDS. Also you may claim for non-professional sports injuries, up to 6 physiotherapy visits each year, medical practitioner consultations up to 3 visits each year and prescription medicine if prescribed by a medical practitioner.</p>	<p>The overall limit for benefits 20-23 is €2,000 each year.</p> <p>Additionally, benefit 23 is limited to €500 and this counts against the overall limit.</p> <p><i>Please note that all physiotherapy must follow referral by a medical practitioner. Additionally physiotherapy is limited to a maximum of 6 sessions. We will consider a further 6 sessions with the submission of an updated doctor's prescription. If further physiotherapy is needed we will need an updated medical report from the attending medical practitioner.</i></p>	
21 Medical practitioner consultations, diagnostic procedures and physiotherapy					
22 Out-patient CT, MRI and PET scanning					
23 Alternative treatment			No benefit		No benefit
24 Accidental damage to teeth					
25 Psychiatry					
26 Nursing-at-home	We will pay up to 30 days a year	We will pay up to 30 days a year			
Other Benefits					
27 Second Medical Opinion	Unlimited access during policy year	Unlimited access during policy year	Unlimited access during policy year	Unlimited access during policy year	
28 Health Screen*	€100 each year for each adult member €75 each year, for each child member	€100 each year for each adult member €75 each year, for each child member	No benefit	No benefit	
29 Teeth Cleaning	€30 each year	No benefit	No benefit	No benefit	
30 Non-routine dental care. Major restorative dental treatments.	70% up to €300 per year	No benefit	No benefit	No benefit	
31 Children vaccinations and administration by a medical practitioner or nurse.*	€100 per child per policy year	€100 per child per policy year	No benefit	No benefit	
32 Travel allowance.*	Up to €200 for each member each year	Up to €200 for each member each year	Up to €200 for each member each year	Up to €200 for each member each year	

*The annual excess does not apply for this benefit.

Optional covers

Out-patient add-on pack		
Benefits		Limit
Yearly Maximum	We will pay up to the maximum shown each year for each member.	€500
GP visits & medical practitioner consultations	We will pay for consultations and treatment with a medical practitioner.	Up to €200 per insured person per membership year (max €25 per visit)
Prescription Drugs	We will pay for drugs prescribed by a medical practitioner.	Up to €150 per insured person per membership year.
Diagnostic Tests	Diagnostic tests received as an out-patient only when referred by a medical practitioner.	Up to €200 per insured person per membership year.
Physiotherapy and Alternative treatments	When referred by a medical practitioner we will pay up to the annual limit for all eligible medical conditions for Out-patient alternative treatments, chiropractic treatment, homeopathy and osteopathy given by a medical practitioner who is registered to practice as a chiropractor, acupuncturist, homeopath or osteopath where the treatment is given	Up to €200 per insured person per membership year (max €25 per session)
Psychiatric treatment	Out-patient treatment of a psychiatric illness. Benefit is payable for treatment given by a psychiatrist or by psychotherapist or a psychologist only when under the control of a psychiatrist.	Up to €200 per insured person per membership year

The above benefits cannot be purchased separately, and if added to the policy, will apply to all insured members, the usual terms and conditions will apply.

Optional Upgrade Pack for Premiere Plan – Comprehensive		
Benefits		Limit
Dental	Cover for extraction, cleaning, composite filling, root canal treatment, bridges and crowns, panoramic X-rays, gingivitis treatment and surgical extraction.	Overall limit €500 each year. Extraction €30 per tooth; Cleaning €40 each year; Composite filling €30 per tooth; Root canal treatment €50 per tooth; Bridges and crowns €80 per tooth; Panoramic X-rays €15 per x-ray; Gingivitis treatment €60 each year; Surgical extraction €80 per tooth.
Optical	Costs for eye tests, prescription glasses and contact lenses. We will pay this so long as the glasses or lenses are used to correct your vision. We accept prescriptions from Opticians as well as Ophthalmologists.	Overall limit €100 each year.
Chronic conditions	Cover for drugs and diagnostic tests related to new chronic conditions. Please note that pre-existing chronic conditions are not covered under this benefit.	Overall limit €300 each year.
Health screen	Health screening cover as per benefit 28. Please note – this upgrade will be in addition to benefit 28. Please note that a waiting period of 12 months is applicable from the effective date of the Optional Upgrade Pack.	Adults €300 each year. Children €200 each year.

The above benefits cannot be purchased separately, and if added to the policy, will apply to all insured members, the usual terms and conditions will apply.

What is not covered

Like most health insurance policies, there are a number of exclusions and limitations on our MultiCare International Health Plans. Some of the key exclusions include:

- Pre-existing conditions
- Unreasonable charges
- Congenital deformities and/or conditions
- Experimental or unproven treatment

Other exclusions may apply, please speak to your insurance intermediary.

How we work to keep your premium affordable

There's a direct relationship between the cost of claims, and the premiums you pay. As a leading insurer in Cyprus and with the support from our partnership with AXA, the treatment charges are continually monitored and with negotiated discounts to contain costs.

Dealing with fraud

Our supporting partner AXA has an industry leading fraud detection and prevention team, helping to drive improvements across the industry by making the most of AXA's global presence in 51* countries around the world. The team work to detect all types of fraud in all corners of the globe by utilising advanced detection approaches and using proactive data analysis. As a steering member of the Health insurance Counter Fraud Group, they help drive improvements in data sharing and are dedicated in working to stay ahead when dealing with the risks that fraud presents.

A global provider network

Through this partnership with AXA, you have access to AXA Global Healthcare's provider network and you can be sure you're getting access to healthcare, no matter where you live. AXA Global Healthcare's network has been carefully selected to ensure that members can receive diagnosis and treatment as quickly as possible when utilising their network and with direct settlement facilities you won't have to pay for your treatment, removing the worry of being out of pocket. We ask that you please call to preauthorise your treatment so that we can facilitate this process.

Being on the ground delivering local health insurance across the globe, AXA are able to negotiate with providers and build their global network of quality accredited hospitals and clinics. Our cooperation with AXA means we can provide consistent care in every setting, while keeping the costs under control.

We're always looking ahead on your behalf – helping keep your premiums sustainable without jeopardizing the quality of health cover we provide.

Dealing with providers charges

We will only reimburse eligible medical providers where their charges are reasonable and customary in accordance with standard and generally accepted medical procedures in a geographic area - based on what providers in the area usually charge for the same or similar medical service. If a claim is deemed by us to be

inappropriate, we reserve the right to reduce the amount payable by us.

Cyprus – 'Reasonable and customary' in Cyprus are considered to be the charges for medical treatment which do not exceed the general limit of fees that would be charged by other doctors and/or hospitals of similar specialisations for similar treatments to those concerning the claim. We therefore encourage you before any scheduled hospital treatment is undertaken, to ask for the estimated cost and then inform us accordingly so that we can let you know whether this amount is within the reasonable and customary charges.

UK and international – 'Reasonable and customary' is based on the average of the negotiated, discounted costs within AXA Global Healthcare's network in the area in which treatment is received. Where no network exists or in respect of independent medical practitioners and other healthcare professionals 'reasonable and customary' is defined as the average cost of the treatment for that country or region according to AXA Global Healthcare's records.

If you have USA (United States of America) cover – If you choose to have your treatment in the USA, it is important for you to call the Customer Support Centre in advance. Our advisor will confirm your entitlement to the benefit for the proposed treatment, help find a suitable medical network provider to receive appropriate care and arrange direct billing with them. Without this, the eligible benefit may not be paid beyond 50% of reasonable and customary costs.

However, in the case of serious accident requiring immediate emergency in-patient treatment, you, or your family member must contact us within 72 (seventy-two) hours of such accident. The benefit for eligible treatment is paid at reasonable and customary costs.

“Access to more than 1.9 million medical providers worldwide” **

More than a health insurance policy



International Emergency Medical Assistance

Should you require medical evacuation or repatriation, you have access, 24 hours a day, 365 days a year to this service anywhere in the world. If you need immediate in-patient treatment, where local facilities are unavailable or inadequate, the International Emergency Medical Assistance service will arrange to take you to the nearest place where the treatment is available.



Second Medical Opinion

You can trust your general physician to give you the right medicines when you have a minor cold. However, when it comes to major illnesses, like cancer or heart surgery, you may want to consult more than one specialist to confirm your diagnosis and further treatment course. Getting a second medical opinion gives you peace of mind before putting your body through extensive treatments. Your plan includes a Second Medical Opinion service which offers a full review of your diagnosis and treatment plan, to make sure you're doing what's right for you. Whether you have unanswered questions, or you need some reassurance, it can be invaluable to double check with another medical expert.



Expert health information helpline

We want to support you whenever you need to talk to a medical expert – not just when you need to claim.

Get the latest information on vaccinations or health precautions before travelling, check on symptoms that are worrying you, understand the facts on a health condition, or simply call for support and reassurance.



Direct settlement in Cyprus and abroad

We have a team of professionals based in Cyprus taking care of your needs, and if you need treatment outside of Cyprus, we work together with AXA - Global Healthcare to support you in finding a suitable medical provider.

Please call us to pre-authorise your treatment and we will arrange in-patient direct billing.



AXA Global healthcare's network

Wherever you are, we want to make it easy for you to find medical providers to cater for your healthcare needs. Finding treatment when you've been diagnosed with a medical condition can be overwhelming and stressful, and if you're not in your own country it can add even more uncertainty. With AXA's online medical provider search tool, you will easily be able to locate hospitals and clinics from AXA Global Healthcare's network: www.axaglobalhealthcare.com/find-universal



* As at December 2023

** As at December 2023

Your questions answered

Will I be covered for any illnesses I've had in the past?

In the majority of cases you will not be covered for illnesses you've had in the past. However, please give us full details of any past medical conditions so we can make a fair decision on your cover.

Do I have access to any preventative treatment?

Health insurance policies do not usually cover preventative treatment. As a member of Premiere, Value Plus with Comprehensive cover or SmartStart, you will have access to a health screening once a year, which will give you peace of mind when it comes to you and your family's health. Please refer to your plan options in detail.

Is long term treatment of cancer covered?

Due to the nature of cancer, we provide full cover including long term treatment.

Am I covered for pregnancy and childbirth?

Yes, please refer to the table of benefits for full benefit details.

Is Optical or Routine Dental cover included?

Not as standard, but can be purchased as part of the optional upgrade pack under the Premiere plan.

Are there any age limits in purchasing or maintaining a plan?

No there are no age limits, either on joining or renewing.

Do I have cover if I get free in-patient treatment from the state health system?

Yes, you are entitled to a cash benefit allowance for each night you receive free treatment. Please refer to the table of benefits for full benefit details.

Can you cover my children too?

Yes, you can include any unmarried children under the age of 21 on your policy for an additional premium. When they reach 21 they will be required to take out their own policy.

Can I have cover if I am a student?

Yes, we have developed a special plan for students 'Student Care' to provide cover whether studying in Cyprus or abroad up to the age of 30 years old.

U connect - Your easiest way to claim

You can also upload your claim documents through <https://uconnect.unilife.com.cy/en/login>

U connect is a web tool where our clients can create an account and upload their claims electronically anywhere at any time.

How often can I claim?

You can claim as many times in a year as you like, although benefit limits may apply.

How can I be sure that I'm covered before I go ahead with treatment?

Just ring the Accident and Health Team at Universal Life on **+357 22 88 22 22** with the details of your proposed treatment. They'll confirm your cover before you incur any treatment costs.

Do I have to pay the hospital if I am admitted?

If you contact us at least 10 days before admission, we may be able to make direct settlement arrangements for you.





RATES

Comprehensive Option												
Age	Premiere				Value Plus				SmartStart			
	Area 1		Area 2		Area 1		Area 2		Area 1		Area 2	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
Up to 34	€2,032	€186	€1,055	€97	€1,313	€120	€830	€76	€711	€65	€470	€43
35 - 44	€2,223	€204	€1,168	€107	€1,415	€130	€898	€82	€891	€82	€566	€52
45 - 54	€2,582	€237	€1,370	€126	€1,672	€153	€1,066	€98	€1,241	€114	€783	€72
55 - 59	€3,144	€288	€1,695	€155	€2,032	€186	€1,313	€120	€1,518	€139	€964	€88
60 - 64	€3,974	€364	€2,189	€201	€2,570	€236	€1,683	€154	€1,927	€177	€1,253	€115
65 - 69	€5,613	€515	€2,964	€272	€3,626	€332	€2,369	€217	€2,782	€255	€1,771	€162
70+	€7,903	€724	€4,120	€378	€5,108	€468	€3,165	€290	€4,012	€368	€2,398	€220
Child Rate	€1,235	€113	€707	€65	€819	€75	€595	€55	€410	€38	€313	€29

Standard Option								
Age	Premiere				Value Plus			
	Area 1		Area 2		Area 1		Area 2	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
Up to 34	€1,246	€114	€583	€53	€764	€70	€393	€36
35 - 44	€1,347	€123	€663	€61	€842	€77	€437	€40
45 - 54	€1,571	€144	€775	€71	€965	€88	€517	€47
55 - 59	€1,919	€176	€943	€86	€1,201	€110	€629	€58
60 - 64	€2,424	€222	€1,246	€114	€1,717	€157	€864	€79
65 - 69	€3,423	€314	€1,751	€161	€2,762	€253	€1,538	€141
70+	€4,816	€441	€2,436	€223	€4,210	€386	€2,312	€212
Child Rate	€752	€69	€359	€33	€483	€44	€258	€24

Excess options are available under the standard option, please contact us for more details.

Student Care				
Excess	Area 1		Area 2	
	Annual	Monthly	Annual	Monthly
No Excess	€1,111	€102	€561	€51
€85 excess	€977	€90	€483	€44
€170 excess	€876	€80	€427	€39

Optional Upgrade Pack for Premiere Comprehensive			
Annual	€400 per member	Monthly	€37 per member

Optional out-patient add-on pack		
Age	Annual	Monthly
0-44	€295	€27
45-64	€305	€28
65+	€382	€35

Student Care				
Excess	Area 1		Area 2	
	Annual	Monthly	Annual	Monthly
No Excess	€910	€83	€449	€41
€85 excess	€786	€72	€382	€35
€170 excess	€696	€64	€348	€32

Contact us:

Customer Support Centre

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Fax +357 22 88 22 13

Email customersupport@unilife.com.cy or through our
Customer service portal U connect

<https://uconnect.unilife.com.cy/en/login>

Insured by



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